

**State of California
Office of Administrative Law**

In re:

Department of Corrections and
Rehabilitation

Regulatory Action:

Title 15, California Code of Regulations

Adopt sections: 3076.4, 3076.5
Amend sections: 3076, 3076.1, 3076.2,
3076.3

Repeal sections:

NOTICE OF APPROVAL OF EMERGENCY
REGULATORY ACTION

Government Code Sections 11346.1 and
11349.6, and Penal Code Section 5058.3

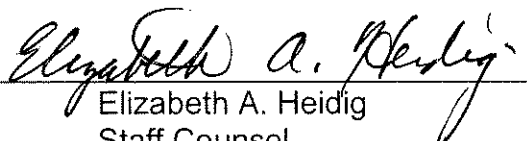
OAL File No. 2011-0617-01 EON

This emergency regulatory action concerns the recall of commitment and was submitted to OAL by the California Department of Corrections and Rehabilitation (CDCR) pursuant to Penal Code section 5058.3 as operationally necessary. This action adopts and amends provisions governing the recall of commitment for eligible inmates who have been determined to be permanently medically incapacitated or terminally ill pursuant to revisions to Penal Code section 1170(e). These regulatory amendments revise the terminally ill provisions (section 3076.1) which relate to Penal Code section 1170(d) and adopt provisions which respect to the permanently medically incapacitated inmates as provided in Penal Code section 1170(e).

OAL approves this emergency regulatory action pursuant to sections 11346.1 and 11349.6 of the Government Code, and section 5058.3 of the Penal Code.

This emergency regulatory action is effective on 7/7/2011 and will expire on 12/15/2011. The Certificate of Compliance for this action is due no later than 12/14/2011.

Date: 7/7/2011


Elizabeth A. Heidig
Staff Counsel

For: DEBRA M. CORNEZ
Assistant Chief Counsel
Acting Director

Original: Matthew Cate
Copy: Rosie Ruiz

NOTICE PUBLICATION/REGULATIONS SUBMISSION

(See instructions on reverse)

STD. 400 (REV. 01-09)

OAL FILE NUMBERS	NOTICE FILE NUMBER Z-	REGULATORY ACTION NUMBER	EMERGENCY NUMBER 2011-0617-01EON
For use by Office of Administrative Law (OAL) only			
NOTICE		REGULATIONS	

2011 JUN 17 AM 11:44
OFFICE OF ADMINISTRATIVE LAW

For use by Secretary of State only

RECEIVED FILED
IN THE OFFICE OF

2011 JUL -7 PM 3:16

Debra Bowen
DEBRA BOWEN
SECRETARY OF STATE

AGENCY WITH RULEMAKING AUTHORITY

California Department of Corrections and Rehabilitation

AGENCY FILE NUMBER (if any)

08-0084

A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)

1. SUBJECT OF NOTICE		TITLE(S)	FIRST SECTION AFFECTED	2. REQUESTED PUBLICATION DATE
3. NOTICE TYPE <input type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other		4. AGENCY CONTACT PERSON	TELEPHONE NUMBER	FAX NUMBER (Optional)
OAL USE ONLY	ACTION ON PROPOSED NOTICE <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn		NOTICE REGISTER NUMBER	PUBLICATION DATE

B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)

1a. SUBJECT OF REGULATION(S) Recall of Commitment		1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S)	
2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)			
SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)		ADOPT 3076.4 and 3076.5 AMEND 3076, 3076.1, 3076.2 and 3076.3 REPEAL	
TITLE(S) 15			
3. TYPE OF FILING			
<input type="checkbox"/> Regular Rulemaking (Gov. Code §11346)	<input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute.	<input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h))	<input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100)
<input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4)	<input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1)	<input type="checkbox"/> File & Print	<input type="checkbox"/> Print Only
<input type="checkbox"/> Emergency (Gov. Code, §11346.1(b))	<input checked="" type="checkbox"/> Other (Specify) <u>Emergency Op Nec. PC 5058.3</u>		
4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1)			
5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100)			
<input type="checkbox"/> Effective 30th day after filing with Secretary of State	<input checked="" type="checkbox"/> Effective on filing with Secretary of State	<input type="checkbox"/> §100 Changes Without Regulatory Effect	<input type="checkbox"/> Effective other (Specify)
6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY			
<input type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660)	<input type="checkbox"/> Fair Political Practices Commission	<input type="checkbox"/> State Fire Marshal	
<input type="checkbox"/> Other (Specify)			
7. CONTACT PERSON Rosie Ruiz	TELEPHONE NUMBER 916-445-2309	FAX NUMBER (Optional) 916-324-6075	E-MAIL ADDRESS (Optional) rosie.ruiz@cdcr.ca.gov

8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

SIGNATURE OF AGENCY HEAD OR DESIGNER
SCOTT KERNAN
TYPED NAME AND TITLE OF SIGNATORY
SCOTT KERNAN, Undersecretary, Operations

DATE

6-16-11

For use by Office of Administrative Law (OAL) only

ENDORSED APPROVED

JUN 07 2011

Office of Administrative Law

Title 15, California Code of Regulations

Division 3, Adult Institutions, Programs and Parole

TEXT OF PROPOSED REGULATIONS

In the following, underline indicates additional text and ~~striketrough~~ indicates deleted text.

Chapter 1. Rules and Regulations of Adult Operations and Programs.

Article 6.5. Intake, Release and Discharge of Inmates.

3076. Recall of Commitment Recommendation Circumstances.

Text in section 3076 is renumbered 3076(a) and is amended to read:

(a) The ~~director~~ Secretary, or designee, may recommend at any time to the sentencing court the recall of an inmate's commitment pursuant to Penal Code (PC) section 1170(d), if the inmate is not sentenced to death, for one or more of the following reasons:

Existing Subsection 3076(a) is deleted:

~~(a) The inmate is terminally ill and is not condemned or sentenced to life without possibility of parole.~~

Existing subsections 3076(b) through 3076(d) are renumbered new subsections 3076(a)(1) through 3076(a)(3) and are amended to read:

~~(b)(1)~~ (1) It is evident from the inmate's exceptional behavior that is so extraordinary beyond simply complying with all regulations and procedures during incarceration that they have changed as a person and would be a positive asset to the community.

~~(e)(2)~~ (2) Information which was not made available to the court in pronouncing the inmate's sentence is brought to the attention of the ~~director~~ Secretary, who deems the information would have influenced the sentence imposed by the court.

~~(d)(3)~~ (3) The ~~director~~ Secretary deems that circumstances have changed to the extent that the inmate's continued incarceration is not in the interest of justice.

Subsection 3076(b) is adopted to read:

(b) The Secretary, or designee, may recommend at any time to the sentencing court the recall of an inmate's commitment pursuant to PC section 1170(e), if the inmate is not sentenced to death or to a term of life without the possibility of parole, for one or more of the following reasons:

New subsections 3076(b)(1) and 3076(b)(2) are adopted to read:

(1) The inmate is terminally ill with an incurable condition caused by an illness or disease that would produce death within six months, as determined by a physician employed by the California Department of Corrections and Rehabilitation.

(2) The inmate is permanently medically incapacitated with a medical condition, that renders him or her permanently unable to perform activities of basic daily living, and results in the inmate requiring 24-hour total care, including, but not limited to coma, persistent vegetative state, brain death, ventilator dependency, loss of control of muscular or neurological function, and that incapacitation did not exist at the time of the original sentencing. Activities of basic daily living are breathing, eating, bathing, dressing, transferring, elimination, arm use, or physical ambulation.

Note: Authority cited: Section 5058, Penal Code. Reference: Sections 1170(d), 1170(e) and 5054, Penal Code.

Section 3076.1 is amended to read:

3076.1. Recall of Commitment Recommendation Consideration Criteria Factors for Penal Code Section 1170(d).

For inmates meeting one or more of the recall eligibility requirements of section 3076(a), the eClassification and pParole rRepresentative, shall consider the following criteria factors as may be applicable before when recommending recall of commitment consideration for an inmate:

~~(a) The inmate is or is not terminally ill or, if diagnosed as having an illness, which results in death, the inmate has more than an estimated six months to live. The inmate's commitment offense.~~

~~(b) The inmate's commitment offense is for one or more of the following felonies: murder, attempted murder, voluntary manslaughter, mayhem, rape with force or violence, sodomy with force or violence, oral copulation with force or violence, lewd acts on a child under 14 years of age, arson, and/or other felonies punishable by imprisonment for life. Whether the inmate has a history of affiliation with organized criminal activity, including, but not limited to, any known disruptive group, street gang, prison gang, terrorist group, or racketeering enterprise.~~

~~(c) The inmate is or is not designated as a high notoriety case by the eClassification sStaff rRepresentative, or their placement has or has not been ordered by the dDepartmental rReview bBoard because of an unusual threat to the safety of persons or public interest in the inmate's case.~~

Existing subsection 3076.1(d) is deleted:

~~(d) The court was aware of the inmate's imminent terminal status at the time of sentencing.~~

Existing subsection 3076.1(e) is renumbered subsection 3076.1(d) and is amended to read:

~~(e)(d)~~ Whether the inmate's prior criminal history reflects includes a pattern of convictions for violent acts against persons pursuant to Penal Code (PC) section 667.5(c) or PC section 1192.7(c), or registerable offenses pursuant to PC section 290.

Existing subsection 3076.1(f) is deleted:

~~(f) The inmate has no prior criminal convictions preceding the commitment offense.~~

Existing subsection 3076.1(g) is renumbered subsection 3076.1(e) and is amended to read:

~~(g)(e)~~ Whether there exists a documented victim or next of kin of the inmate's commitment offense in the community who would suffer fear from the release of the inmate back into the community.

Existing subsection 3076.1(h) is renumbered subsection 3076.1(f) and is amended to read:

~~(h)(f)~~ Whether the inmate's documented institutional behavior reflects an ongoing, a history serious pattern of offenses involving force, violence, assault, arson, or predatory sexual behavior.

Existing subsection 3076.1(i) is deleted.

~~(i) The inmate is terminally ill and there are or are not verifiable community resources appropriate, sufficient, and immediately available to provide support and sustenance and to meet the inmate's medical and/or psychological needs upon release.~~

Subsection 3076.1(g) is adopted to read:

(g) Whether the inmate has committed any other criminal acts, either prior to or during the current period of incarceration, that indicate he or she would be a danger to the public if released.

Note: Authority cited: Section 5058, Penal Code. Reference: Sections 1170(d), 3043 and 5054, Penal Code.

Section 3076.2 is amended to read:

3076.2. Recall of Commitment Processing for Penal Code Section 1170(d).

Existing subsection 3076.2(a) is deleted:

~~(a) Recall of Commitment Processing for Terminally Ill Inmates.~~

Existing subsection 3076.2(a)(1) is renumbered subsection 3076.2(a) and is amended to read:

~~(a)(1) Requests for a determination consideration that an inmate is terminally ill and that they be considered for recall of commitment which are initiated by the facility at any time or by the sentencing court more than 120 days after the date of the inmate's commitment shall be referred to the inmate's caseworker, who shall inform the inmate's treating physician or the facility's chief medical officer of the request~~ Classification and Parole Representative (C&PR).

Existing subsection 3076.2(a)(2) is renumbered subsection 3076.2(b) and is amended to read:

~~(2)(b) For the purpose of this regulation, the facility's chief medical officer must also concur with the treating physician's prognosis of the inmate. Upon receipt of the request, the C&PR shall consider the factors listed in section 3076.1 and review the inmate's central file to determine if the inmate is sentenced to death.~~

Existing subsection 3076.2(a)(3) is renumbered subsection 3076.1(b)(1) and is amended to read:

~~(3)(1) Within three working days of the caseworker advising the chief medical officer or the inmate's treating physician of the request or of a medical staff member's discovery of a medical condition appropriate for eligibility review, the chief medical officer shall determine if the inmate is terminally ill. This determination shall be documented on a CDC Form 128-C, Chrono-Medical-Psych-Dental, which shall include a description of the inmate's illness, physical condition, estimated life expectancy and desire to participate in a recall consideration, and which shall be submitted to the classification and parole representative. If the inmate is sentenced to death, the C&PR shall document the reason for the ineligibility on a CDC Form 128-B (Rev. 04/74), General Chrono. The original CDC Form 128-B shall be filed in the inmate's central file and a copy, excluding any confidential material as defined in section 3321, sent to the inmate. A formal, written response shall be provided to the sentencing court or the Secretary, including the reason the inmate is not eligible for Penal Code (PC) section 1170(d) recall.~~

Existing subsection 3076.2(a)(4) is renumbered new subsection 3076.2(b)(2) and is amended to read:

~~(4)(2) The classification and parole representative shall review the report and the inmate's central file and consider the criteria listed in section 3076.1 before recommending recall of commitment consideration for the inmate. If the inmate is not sentenced to death, the C&PR shall submit the request to the inmate's caseworker. The inmate's caseworker shall have five working days to prepare an evaluation report, noting the inmate's case factors as listed in section 3076.1, and include the following information and attachments:~~

New subsections 3076.2(b)(2)(A) through 3076.2(b)(2)(I) are adopted to read:

(A) The inmate's cumulative case summary including, but not limited to the following information:

1. Inmate's name and CDC number.
2. Current commitment offense, brief description of the crime, and sentence.
3. County of commitment.
4. Prior juvenile and adult criminal history.
5. Active or potential holds, warrants, detainers.
6. Institutional adjustment, including rules violation reports, counseling chronos, pending disciplinary actions, gang/disruptive group information, placement score, current housing assignment, work and education assignments, and participation in self-help activities.
7. Mental health and developmental disability status.

(B) A list of any victim notification or other special notification requirements.

(C) The inmate's post-release plan.

(D) Abstract of Judgment for the inmate's current commitment offense.

(E) Probation Officer's Report for the inmate's current commitment offense.

(F) Institutional Staff Recommendation Summary.

(G) Legal Status Summary.

(H) CDC Form 112 (Rev. 09/83), Chronological History.

(I) The inmate's most recent Board of Parole Hearings Parole Consideration Report with the Lifer Parole Hearing Decision Face Sheet containing the Board of Parole Hearings' disposition (applies only to inmates who are sentenced to an indeterminate term).

Existing subsection 3076.2(a)(5) is renumbered new subsection 3076.2(c) and is amended to read:

~~(5)(c) If the classification and parole representative recommends against further recall consideration, the reasons shall be documented on a CDC Form 128-B, Chrono General (Rev. 4/74), which shall be countersigned by the warden or chief deputy warden within three working days of receipt of the CDC Form 128-C. The original CDC Form 128-B shall be filed in the inmate's central file and a copy, excluding any confidential material as defined in section 3321, sent to the inmate. The C&PR shall review and forward the evaluation report to the warden or chief deputy warden within three working days.~~

Existing subsection 3076.2(a)(6) is renumbered new subsection 3076.2(d) and is amended to read:

~~(6)(d) If the classification and parole representative determines that the case warrants recall consideration, the CDC Form 128-C shall be submitted to the inmate's caseworker, who shall investigate and evaluate the inmate's suitability for recommendation of recall and document their evaluation in a report, with the following attachments:~~

~~(A) The CDC Form 128-C.~~

~~(B) The inmate's cumulative case summary.~~

~~(C) A list of any victim notification or other special notification requirements.~~

The warden or chief deputy warden shall review and sign the evaluation report and ensure it is forwarded to California Department of Corrections and Rehabilitation headquarters within three working days.

Existing subsection 3076.2(a)(7) is renumbered new subsection 3076.2(e) and is amended to read:

~~(7)(c) The institution's evaluation and recommendation for a Penal Code section 1170(d) recall of a terminally ill inmate, if in favor of recall or equivocal, or in all cases if the evaluation was originally requested by the sentencing judge or if the inmate's term of imprisonment is under the jurisdiction of the Board of Prison Terms pursuant to Penal Code section 1170.2, shall be signed by the warden or chief deputy warden and forwarded within twelve working days from the date of the CDC Form 128-C to department headquarters, and if the inmate's term of imprisonment is under the jurisdiction of the Board of Prison Terms pursuant to Penal Code section 1170.2, to the Board of Prison Terms. The evaluation report for a PC section 1170(d) recall shall be referred to the Secretary, or designee, for review and consideration.~~

New subsections 3076.2(e)(1) through 3076.2(h) are adopted to read:

(1) If a positive recommendation for recall is made, and the inmate is sentenced to a determinate term, the Secretary, or designee's, recommendation shall be referred directly to the sentencing court.

(2) If the inmate is sentenced to an indeterminate term, the Secretary or designee's recommendation, whether positive or negative, shall be referred to the Board of Parole Hearings for review and consideration.

(f) When the court requests a post-sentence report within 120 days of the inmate's sentencing, the inmate's caseworker shall evaluate all available information, and assess the inmate's potential for completing probation or other alternate sentencing, and the threat posed to the community if the inmate fails to realize that potential. The inmate's caseworker shall complete an evaluation report, as described in subsection 3076.2(b)(2), and forward the report to the C&PR within five working days.

(g) The C&PR shall have three working days to review the evaluation report and forward it to the warden or chief deputy warden.

(h) The warden or chief deputy warden shall review and sign the evaluation report and submit it directly to the sentencing court within three working days.

Existing subsections 3076.2(b) through 3076.2(b)(5) are deleted.

~~(b) Recall of Commitment Processing for Non-Terminally Ill Inmates~~

~~(b)(1) Requests for consideration for recall of commitment which are initiated by the facility at any time or by the sentencing court more than 120 days after the date of commitment shall be referred to the classification and parole representative via the inmate's caseworker.~~

~~(b)(2) Upon receipt of the request, the classification and parole representative shall consider the criteria listed in section 3076.1 and the inmate's central file before recommending recall of commitment consideration for the inmate.~~

~~(b)(3) If the classification and parole representative recommends against further recall consideration, the reasons shall be documented on a CDC Form 128-B, Chrono-General (Rev. 4/74), which shall be countersigned by the warden or chief deputy warden. The original CDC Form 128-B shall be filed in the inmate's central file and a copy, excluding any confidential material as defined in section 3321, sent to the inmate.~~

~~(b)(4) If the classification and parole representative determines that the inmate's case warrants recall consideration, the classification and parole representative's findings shall be submitted to the inmate's caseworker, who shall investigate and evaluate the inmate's suitability for recommendation of recall and document their evaluation in a report, with the following attachments:~~

~~(b)(4)(A) The inmate's cumulative case summary.~~

~~(b)(4)(B) A list of any victim notification or other special notification requirements.~~

~~(b)(5) The institution's evaluation and recommendation for a Penal Code section 1170(d) recall of the inmate, if in favor of recall or equivocal, or in all cases if the evaluation was originally requested by the sentencing judge or if the inmate's term of imprisonment is under the jurisdiction of the Board of Prison Terms pursuant to Penal Code section 1170.2, shall be signed by the warden or chief deputy warden and forwarded to department headquarters, and if the inmate's term of imprisonment is under the jurisdiction of the Board of Prison Terms pursuant to Penal Code section 1170.2, to the Board of Prison Terms.~~

Note: Authority cited: Section 5058, Penal Code. Reference: Sections 1170(d), 3043 and 5054, Penal Code.

New section 3076.3 is adopted to read:

3076.3. Recall of Commitment Recommendation Consideration Factors for Penal Code Section 1170(e).

For inmates meeting one or more of the recall eligibility requirements of section 3076(b), the Classification and Parole Representative (C&PR), shall consider the following factors as may be applicable when recommending recall of commitment consideration for an inmate:

(a) The inmate's commitment offense.

(b) Whether the inmate has a history of affiliation with organized criminal activity, including, but not limited to, any known disruptive group, street gang, prison gang, terrorist group, or racketeering enterprise.

(c) The inmate is or is not designated as a high notoriety case by the Classification Staff Representative, or their placement has or has not been ordered by the Departmental Review Board because of an unusual threat to the safety of persons or public interest in the inmate's case.

(d) Whether the court was aware of the inmate's medical condition at the time of sentencing.

(e) Whether the inmate's prior criminal history includes violent acts against persons pursuant to Penal Code (PC) section 667.5(c) or PC section 1192.7(c), or registerable offense pursuant to PC section 290.

(f) Whether there exists a documented victim or next of kin of the inmate's commitment offense in the community who would suffer fear from the release of the inmate back into the community.

(g) Whether the inmate's documented institutional behavior reflects a history of offenses involving force, violence, assault, arson, or predatory sexual behavior.

(h) Whether there are verifiable community resources appropriate, sufficient, and immediately available to provide support and sustenance and to meet the inmate's medical and/or psychological needs upon release.

(i) Whether the inmate has committed any other criminal acts, either prior to or during the current period of incarceration, that indicates he or she would be a danger to the public if released.

(j) Whether the inmate retains the capacity to commit or to influence others to commit criminal acts that endanger public safety.

Note: Authority cited: Section 5058, Penal Code. Reference: Sections 1170(e), 3043 and 5054, Penal Code; Martinez v. Board of Parole Hearings (2010) 183 Cal.App.4th 578.

New section 3076.4 is adopted to read:

3076.4. Recall of Commitment Processing for Penal Code Section 1170(e).

A physician employed by the California Department of Corrections and Rehabilitation (CDCR) who determines an inmate meets the eligibility requirements described in Subsection 3076(b), shall initiate the recall process on behalf of the inmate. The inmate or his or her family member or designee may also independently request Penal Code (PC) section 1170(e) recall consideration by contacting the institution's Chief Medical Officer (CMO) or Chief Medical Executive (CME), or the Secretary.

(a) The physician shall document on a CDC Form 128-C (Rev. 01/96), Chrono – Medical-Psychiatric-Dental, the inmate's illness, functional status, including the inmate's abilities or limitations in performing activities of daily living, ambulatory status, the reason why the inmate has six months or less to live or is permanently medically incapacitated, and his or her desire to participate in the recall process.

(b) The CMO or CME, Deputy Medical Executive, and Statewide Chief Medical Executive, California Prison Health Care Services, shall have five working days to review and sign the CDC Form 128-C, approving the physician's prognosis. The signed CDC Form 128-C shall be submitted to the C&PR within three working days following the Statewide Chief Medical Executive's approval.

(1) If the CMO or CME, or the Deputy Medical Executive, or the Statewide Chief Medical Executive do not concur with the physician's prognosis, the recall of commitment process shall be terminated.

(c) The C&PR shall review the CDC Form 128-C and the inmate's central file.

(1) If the inmate is sentenced to death or to life without the possibility of parole, the Classification and Parole Representative (C&PR) shall document the reason for the ineligibility on a CDC Form 128-B (Rev. 04/74), General Chrono, and file the original in the inmate's central file. A copy of the CDC Form 128-B excluding any confidential information, as defined in section 3321, shall be sent to the inmate and the inmate's physician.

(2) If the inmate is not sentenced to death or to life without the possibility of parole, medical staff shall explain the recall of commitment process to the inmate within 48 hours of notification and arrange for the inmate to designate a family member or other outside agent on CDCR Form 7385 (Rev. 09/09), Authorization for Release of Information, which is incorporated by reference. The inmate's designee shall be informed about the recall of commitment process and the inmate's medical condition. If the inmate is mentally unfit to designate a family member or other outside agent, medical staff shall contact the inmate's emergency contact listed on the CDC Form 127 (Rev. 06/01), Notification in Case of Death, Serious Injury, or Serious Illness, which is incorporated by reference, and advise them of the recall process.

(d) The C&PR shall submit the CDC Form 128-C to the inmate's caseworker. The inmate's caseworker shall have five working days to prepare an evaluation report noting the inmate's case factors as listed in section 3076.3, which consists of the following information and attachments:

(1) CDC Form 128-C.

(2) The inmate's cumulative case summary, including, but not limited to the following information:

(A) Inmate's name and CDC number.

(B) Current commitment offense, brief description of the crime, and sentence.

(C) County of commitment.

(D) Prior juvenile and adult criminal history.

(E) Active or potential holds, warrants, detainers.

(F) Institutional adjustment, including rules violation reports, counseling chronos, pending disciplinary actions, gang/disruptive group information, placement score, current housing assignment, work and education assignments, and participation in self-help activities.

(G) Mental health and developmental disability status.

(3) A list of any victim notification or other special notification or registration requirements.

(4) The inmate's post-release plan.

(5) CDCR Form 7385 (Rev. 09/09), Authorization for Release of Information.

(6) CDCR Form 3038 (12/10) Notification to Inmate/Inmate Designee - Recall and Re-sentencing Procedure, which is incorporated by reference.

(7) CDCR Form 3039 (12/10), Waiver of Defendant's Personal Presence at the Recall and Re-sentencing Hearing, which is incorporated by reference.

(8) Abstract of Judgment for the inmate's current commitment offense.

(9) Probation Officer's Report for the inmate's current commitment offense.

(10) Institutional Staff Recommendation Summary.

(11) Legal Status Summary.

(12) CDC Form 112 (Rev. 09/83) Chronological History.

(13) The inmate's most recent Board of Parole Hearings Parole Consideration Report with the Lifer Parole Hearing Decision Face Sheet containing the Board of Parole

Hearings' disposition (applies only to inmates who are sentenced to an indeterminate term).

(e) The C&PR shall review and forward the evaluation report to the warden or chief deputy warden within three working days.

(f) The warden or chief deputy warden shall review and sign the evaluation report and ensure it is forwarded to CDCR headquarters within three working days.

(g) The evaluation report for a PC section 1170(e) recall shall be referred to the Secretary, or designee, for review and consideration.

(1) If a positive recommendation for recall is made, and the inmate is sentenced to a determinate term, the recommendation shall be referred directly to the sentencing court and shall include one or more medical evaluations, the findings of which must determine the inmate meets the criteria set forth in PC section 1170(e)(2), and a post-release plan.

(2) If the inmate is sentenced to an indeterminate term, the Secretary or designee's recommendation, whether positive or negative, shall be referred to the Board of Parole Hearings for review and consideration.

(h) Pursuant to PC section 1170(e)(9), if the sentencing court grants the recall and resentencing application, the inmate shall be released by the department within 48 hours of receipt of the court's order, unless a longer time period is agreed to by the inmate or ordered by the court. If the inmate has agreed to waive the 48-hour release requirement, the department shall request the sentencing court include in its order that the inmate shall be released within 30 calendar days to allow for the coordination of his or her housing and medical needs in the community to a location where access to care is available.

(i) If the Division of Adult Parole Operations (DAPO) is coordinating the inmate's placement within the community, the C&PR shall provide a copy of the release order to DAPO upon receipt from the sentencing court.

(j) At the time of release, medical staff shall ensure the inmate has each of the following in his or her possession; a discharge medical summary, full medical records, State identification, parole medication, and all property belonging to the inmate. After discharge, any additional records shall be sent to the inmate's forwarding address.

Note: Authority cited: Section 5058, Penal Code. Reference: Sections 1170(e), 3043 and 5054, Penal Code; Martinez v. Board of Parole Hearings (2010) 183 Cal.App.4th 578.

Section 3076.3 is renumbered new section 3076.5 and is amended to read:

3076.5. Victim Notification for Recall of Commitment Recommendations.

When informed by department headquarters or the Board of Parole Hearings that an inmate's commitment has been recommended for recall to the sentencing court, the

~~inmate's e~~Classification and ~~p~~Parole ~~r~~Representative shall notify any victim of a crime committed by the inmate, or the victim's next of kin ~~if the victim has died~~, provided that the victim or the victim's next of kin has formally requested notice about the status of the inmate in prison, including, but not limited to, notification of release, escape, or death, or of any hearing to review or consider the release or parole suitability or the setting of a parole date for the inmate, in writing; either by submitting a signed letter or a completed CDCR Form 1707 (Rev. 04/08), Request For Victim Services, which is incorporated by reference, to the Office of Victim and Survivor Rights and Services, and the requesting party has kept the department or the Board of Prison Terms Parole Hearings apprised of their current mailing address. The notification shall include the name and address of the court that will consider the recall of the inmate's commitment.

Note: Authority cited: Section 5058, Penal Code. Reference: Sections 1170(d), 1170(e), 3043 through 3043.3 and 5054, Penal Code.

ADOPT

AUTHORIZATION FOR RELEASE OF INFORMATION

YOUR INFORMATION			
Last Name:	First Name:	Middle Name:	Date of Birth:
Address:	City/State/Zip:		CDC/YA Number:

Person/Organization Providing the Information	Person/Organization to Receive the Information
Name: _____	Name: _____
Address: _____	Address: _____
City/State/Zip: _____	City/State/Zip: _____
Phone #: (____) _____	Phone #: (____) _____
Fax Number: (____) _____	Fax Number: (____) _____
[45 C.F.R. § 164.508(c)(1) (iii) & Civ. Code § 56.11(e), (f)]	

Description of the Information to be Released (Provide a detailed description of the specific information to be released) [45 C.F.R. § 164.508(c)(1)(i) & Civ. Code §§ 56.11(d) & (g)]		
<input type="checkbox"/> Medical	<input type="checkbox"/> Mental Health	<input type="checkbox"/> Genetic Testing
<input type="checkbox"/> Dental	<input type="checkbox"/> Substance Abuse/Alcohol	<input type="checkbox"/> Communicable Disease
<input type="checkbox"/> HIV	<input type="checkbox"/> Psychotherapy Notes	<input type="checkbox"/> Other (Please Specify)
For the following period of time: From _____ (date) to _____ (date)		

Description of Each Purpose for the Use or Release of the Information (Indicate how the information will be used) [45 C.F.R. § 164.508(c)(1)(iv)]		
<input type="checkbox"/> Health Care	<input type="checkbox"/> Personal Use	<input type="checkbox"/> Legal
<input type="checkbox"/> Other (please specify) _____		

Will the health care provider receive money for the release of this information?

[45 C.F.R. § 164.524 (c) (4) (i), (ii)]

Reasonable fees may be charged to cover the cost of copying and postage.

This authorization for release of the above information to the above-named persons/organizations will expire on: _____ (date). [45 C.F.R. § 164.508(c)(1)(v) & Civ. Code § 56.11(h)]

I understand:

- I authorize the use or disclosure of my individually identifiable health information as described above for the purpose listed. I understand that this authorization is voluntary. [45 C.F.R. § 164.508(c)(2)(i)]
- I have the right to revoke this authorization by sending a signed notice stopping this authorization to the health Records department at my current institution. The authorization will stop further release of my health information on the date my valid revocation request is received in the Health Records department. [45 C.F.R. § 164.508(c)(2)(i) & Civ. Code § 56.11(h)]
- I am signing this authorization voluntarily and that my treatment will not be affected if I do not sign this authorization. [45 C.F.R. § 164.508(c)(2)(ii)]
- Under California law, the recipient of the protected health information under the authorization is prohibited from re-disclosing the information, except with a written authorization or as specifically required or permitted by law. If the organization or person I have authorized to receive the information is not a health plan or health care provider, the released information may no longer be protected by federal privacy regulations. [45 C.F.R. 164.508(c)(2)(ii)]
- I understand I have the right to receive a copy of this authorization. [Civ. Code § 164.508 (c)(4) and Civ. Code § 56.11(i)]

Signature:	CDC/YA Number:	Date:
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[45 C.F.R. § 164.508(c)(1)(vi) & Civ. Code § 56.11(c)(1)]

Representative:	Relationship:	Date:
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[45 C.F.R. § 164.508(g)(1) & Civ. Code § 56.11(c)(2)]

ADOPT

STATE OF CALIFORNIA

DEPARTMENT OF CORRECTIONS

**NOTIFICATION IN CASE OF INMATE DEATH, SERIOUS INJURY,
OR SERIOUS ILLNESS**

CDC 127 (Rev 06/01)

CDC NUMBER	COMMITMENT NAME	INSTITUTION
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The inmate shall provide accurate information to identify the next of kin and any person(s) to be notified in the event of his/her death, serious illness, or serious injury as determined by a physician. In compliance with Penal Code Section 5022, the inmate shall provide the name(s), last known address(es), and telephone number(s) of the next of kin and person(s) to be notified. The inmate shall also notify his or her assigned Correctional Counselor of changes as soon as possible. Staff shall use reasonable effort to contact the person(s) identified by the inmate based on the information provided by the inmate. Therefore, it is important that the inmate ensure the information provided is current and accurate.

NAME OF KIN	STREET ADDRESS		TELEPHONE NUMBER (HOME)
RELATIONSHIP	CITY	STATE ZIP CODE	TELEPHONE NUMBER (WORK)
NAME OF KIN	STREET ADDRESS		TELEPHONE NUMBER (HOME)
RELATIONSHIP	CITY	STATE ZIP CODE	TELEPHONE NUMBER (WORK)

NAME OF PERSON TO NOTIFY	STREET ADDRESS		TELEPHONE NUMBER (HOME)
RELATIONSHIP	CITY	STATE ZIP CODE	TELEPHONE NUMBER (WORK)

If the inmate has a will, the inmate shall identify the person to be contacted who possesses or has access to it. This form is not to be used as a will.

NAME OF CONTACT FOR WILL	STREET ADDRESS		TELEPHONE NUMBER (HOME)
ENTER NONE IF THERE IS NO WILL	CITY	STATE ZIP CODE	TELEPHONE NUMBER (WORK)

Is inmate a foreign national? ☐ Yes ☐ No

This information shall be updated annually as part of the classification review process, as part of the classification committee review when the inmate is being referred to the Classification Staff Representative for program placement or transfer consideration, or whenever the inmate desires to revise the information.

DATE	INMATE'S SIGNATURE	COUNSELING STAFF WITNESS'S PRINTED NAME/ TITLE/ SIGNATURE	INSTITUTION
DATE	INMATE'S SIGNATURE	COUNSELING STAFF WITNESS'S PRINTED NAME/ TITLE/ SIGNATURE	INSTITUTION
DATE	INMATE'S SIGNATURE	COUNSELING STAFF WITNESS'S PRINTED NAME/ TITLE/ SIGNATURE	INSTITUTION
DATE	INMATE'S SIGNATURE	COUNSELING STAFF WITNESS'S PRINTED NAME/ TITLE/ SIGNATURE	INSTITUTION
DATE	INMATE'S SIGNATURE	COUNSELING STAFF WITNESS'S PRINTED NAME/ TITLE/ SIGNATURE	INSTITUTION
DATE	INMATE'S SIGNATURE	COUNSELING STAFF WITNESS'S PRINTED NAME/ TITLE/ SIGNATURE	INSTITUTION
DATE	INMATE'S SIGNATURE	COUNSELING STAFF WITNESS'S PRINTED NAME/ TITLE/ SIGNATURE	INSTITUTION
DATE	INMATE'S SIGNATURE	COUNSELING STAFF WITNESS'S PRINTED NAME/ TITLE/ SIGNATURE	INSTITUTION
DATE	INMATE'S SIGNATURE	COUNSELING STAFF WITNESS'S PRINTED NAME/ TITLE/ SIGNATURE	INSTITUTION
DATE	INMATE'S SIGNATURE	COUNSELING STAFF WITNESS'S PRINTED NAME/ TITLE/ SIGNATURE	INSTITUTION

Additional instructions are listed on the back of this form.

DISTRIBUTION
 ORIG - C-FILE
 COPY - INMATE

THIS FORM IS NOT A WILL

**NOTIFICATION IN CASE OF INMATE DEATH, SERIOUS INJURY,
OR SERIOUS ILLNESS**
CDC 127 (Rev 06/01)

PENAL CODE SECTION 5022

- (a) Upon entry of a prisoner in a facility operated by the Department of Corrections and at least every year thereafter, the Director of Corrections shall obtain from the prisoner the name and last known address and telephone number of any person or persons who shall be notified in the event of the prisoner's death or serious illness or serious injury, as determined by the physician in attendance, and who are authorized to receive his or her body. The persons shall be noted in the order of the prisoner's preference. The Director of Corrections shall provide the prisoner with the opportunity to modify or amend his or her notification list at any time.
- (b) The Director of Corrections shall use all reasonable means to contact the person or persons set forth in the notification list upon the death or serious illness or serious injury, as determined by the physician in attendance, of the prisoner while confined in a facility operated by the Department of Corrections.

SELECTIONS FROM PENAL CODE 5061

Whenever any person confined in any state institution subject to the jurisdiction of the Department of Corrections dies, and no demand or claim is made upon the Director or his or her designee for the body of the deceased inmate by the inmate's next of kin or legally appointed representative, the director shall dispose of the body by cremation or burial no sooner than 10 calendar days after the inmate's death. The Director or his or her designee may waive the 10-day waiting period for disposal of the deceased inmate's body if confirmation is received that the inmate's next of kin, or other individual identified by the inmate, refuses to take possession of the body. If any personal funds or property of that person remains in the custody or possession of the Director of Corrections, the funds shall be applied to the payment of his or her cremation or burial expenses and related charges.

INSTRUCTIONS FOR COMPLETING CDC FORM 127

1. Initial preparation of CDC Form 127 shall be completed at the Reception Center during reception center processing.
2. Staff shall be responsible for interviewing the inmate to obtain and document the necessary information on the form. The CDC Form 127 **shall not** be completed by the inmate.
3. The inmate is responsible for providing complete and accurate information to the CCI or person who is preparing this form. The inmate shall identify each person to notify by full name, relationship of the person to inmate, the complete mailing address, the home telephone number, and the work telephone number.
4. The inmate's dated signature must be witnessed by a counseling staff member and documented with the date, staff member's printed name, signature, and institution.
5. Information shall be updated annually as part of the inmate's annual classification review process and when referred to the Classification Staff Representative for program placement or transfer endorsement. The information shall also be updated upon the inmate's request.
6. If the inmate has a will, the inmate is responsible to identify the person who possesses or has access to it. If the inmate reports that he or she has no will, then the word "NONE" shall be entered into the appropriate box. **NOTE: THIS FORM IS NOT TO BE USED AS A WILL.**
7. If the inmate is a foreign national, written notification within 72 hours of the official notice of death shall be made to the appropriate consulate post. The notification shall include the inmate's name, CDC number, date and time of death, and the attending physician's name.
8. The information on this form shall be typed or legibly handwritten in ink by a staff member. Corrections shall not be made with correction fluid or tape. Required corrections shall be made by striking through information to be deleted, and providing a signature and printed name of the staff member making a correction.
9. Staff should consult the CDC Legal Affairs Division regarding any questions dealing with the release of the decedent's remains, property, or funds.
10. This form shall be placed as the top document in the Miscellaneous Section of the inmate's Central File. Updated forms shall be placed in reverse chronological order, the most recent being on top. Each form shall be retained in the C-File.
11. In the case of death, serious injury or serious illness, as determined by the attending physician, designated staff shall make a reasonable effort to notify each individual and next of kin listed on this form.

ADOPT

**NOTIFICATION TO INMATE/INMATE DESIGNEE
RECALL AND RE-SENTENCING PROCEDURE
Penal Code Section 1170(e)**

To: _____

CDC #: _____

Institution: _____

Date: _____

This serves as the required notification, pursuant to Penal Code (PC) Section 1170(e)(4), that the recall and re-sentencing process has been initiated on your behalf, by one or more of the following persons:

- ☐ You. ☐ Your treating physician. ☐ Your family member or designee.

The California Department of Corrections and Rehabilitation (CDCR) Form 128-C, Medical Chrono, dated _____, signed by _____ M.D., Chief Medical Officer or Chief Medical Executive, has determined your eligibility for consideration based on one or more of the following criteria:

- ☐ You are terminally ill with an incurable condition caused by an illness or disease that will result in death within six months, as determined by a CDCR physician.
- ☐ You are permanently medically incapacitated with a medical condition that renders you permanently unable to perform activities of basic daily living and results in you requiring 24-hour total care, and that your permanent medical incapacitation did not exist at the time you were sentenced.

As an inmate being considered for recall and re-sentencing, you understand that you must authorize the release of all medical information to those individuals involved in the recall of commitment process. This includes CDCR institution and headquarters' staff, Board of Parole Hearings staff, California Prison Health Care Services staff, and the sentencing court. *Note: If you do not authorize the release of your medical information for recall and resentencing, the CDCR may choose to seek legal authority to release your medical information.*

Do you authorize the release of your medical information to the individual(s) listed above for this purpose?

- ☐ **YES.** I am authorizing the release of my medical information. CDCR Form 7385, Authorization for Release of Information, completed and attached to this form.
- ☐ **NO.** I do not authorize the release of my medical related information. I understand CDCR may choose to seek legal authority to release my medical information.

Medical staff will arrange for you to designate a family member or other outside agent to be notified of your medical condition and prognosis and the recall and resentencing procedures.

- ☐ I have designated the person below to receive information regarding my medical condition and be informed about the status of the recall and re-sentencing process. CDCR Form 7385, Authorization for Release of Information, for designee completed and attached to this form.

Designee: _____

Relationship: _____

Telephone Number: _____

Date of Designation: _____

- ☐ I do not wish to designate a family member or outside agent at this time.

To: _____

CDC #: _____

All recall and re-sentencing cases are reviewed for recommendation by the Secretary or the Secretary's designee.

- ☐ As an inmate sentenced under the Determinate Sentencing Law, a positive recommendation will be forwarded directly to the sentencing court. If a recommendation is made that no change be made to your sentence and commitment, notification will be made to the Warden.
- ☒ As an inmate sentenced under the Indeterminate Sentencing Law, the recommendation will be forwarded to the Board of Parole Hearings. The Board will make an independent finding and take action at the next lawfully noticed Board meeting. A positive recommendation will be forwarded to the sentencing court.

Within 10 days of receipt of a positive recommendation by the Secretary or the Board, the court shall schedule a hearing to consider whether your sentence should be recalled. A positive recommendation by the Secretary or the Board does not guarantee your release.

Pursuant to Penal Code Section 1170(e)(9), if the sentencing court grants your recall and resentencing application, and it results in your release, you shall be released by the Department within 48 hours of receipt of the court's order, unless a longer time is agreed to by you. **In the event placement arrangements can not be coordinated within 48 hours of receipt of the court's order, and to ensure your housing and medical needs are coordinated appropriately, do you agree to waive the 48-hour requirement and be released within 30 calendar days to a location where access to care is available?**

☐ YES

☐ NO

Questions specific to the recall of commitment process should be directed to your Correctional Counselor, Correctional Counselor II, and/or the Classification and Parole Representative (C&PR). All medical related questions should be directed to medical staff at the institution where you are assigned. Requests for copies of any or all recall and re-sentencing documents by anyone other than you or your designee must be made through the C&PR and requires your authorization on a CDCR Form 7385.

EFFECTIVE COMMUNICATION

I have informed the inmate of this notice and have determined that he/she:

- ☐ Appears to understand ☐ Appears to have difficulty understanding
- ☐ Has a physical condition which impacts effective communication

Method Used: (please circle): Foreign Language Interpreter Sign Language Interpreter Read/Spoke Slowly
Assistive Device (specify) _____ Other (please write): _____

After providing assistance, the inmate:

- ☐ Explained the conditions in his/her own words ☐ Does not appear to understand

Inmate's Name (Print or Type)	Date Notice Provided: _____	Notice Provided by (Print or Type Counselor's Name)
Inmate's Signature	<input type="checkbox"/> In person <input type="checkbox"/> Copy of Notice provided	Counselor's Signature
Inmate Designee, if applicable (Print or Type)	Date Notice Provided: _____ <input type="checkbox"/> In person <input type="checkbox"/> Telephone <input type="checkbox"/> Copy of Notice provided	Notice Provided by (Print or Type Counselor's Name)

ADOPT

**WAIVER OF DEFENDANT'S PERSONAL PRESENCE
AT THE RECALL AND RE-SENTENCING HEARING
Penal Code Section 1170(e)**

For the Superior Court of California

County of _____
(Print or Type County of Commitment)

"The undersigned defendant, having been advised of his or her right to be present at all stages of the court proceedings, including, but not limited to, presentation of and arguments on questions of fact and law, and to be confronted and cross-examined by all witnesses, hereby waives the right to be present at the hearing of any motion or other court proceedings in this cause. The undersigned defendant hereby requests the court to proceed during every absence of the defendant that the court may permit pursuant to this waiver, and hereby agrees that his or her interest is represented at all times by the presence of his or her attorney the same as if the defendant were personally present in court, and further agrees that notice to his or her attorney that his or her presence in court on a particular day at that particular time is required is notice to the defendant of the requirement of his or her appearance at that time and place."

Executed on _____ by _____
Date **Staff Name/Title (Print)**

Staff Signature

Inmate Name (Print)

Inmate Signature

CDC #

Date

☐ **Inmate unable to sign waiver due to his or her medical condition.**

USE BALLPOINT PEN AND PRESS DOWN FIRMLY. SEE REVERSE SIDE FOR INSTRUCTIONS.

SECTION A. APPLICANT INFORMATION

SECTION B. NOTIFICATION OF INMATE STATUS IN PRISON

SECTION C. CONDITIONS OF PAROLE FOR INMATE

SECTION D. RESTITUTION

SECTION E. INMATE IDENTIFICATION

SECTION F. APPLICANT SIGNATURE

☐ Pink copy---keep for your records

INSTRUCTIONS

Read the following instructions carefully to fill out the front side of the form so that it can be processed correctly.

NOTE: Use ballpoint pen and press down firmly when filling out form.

Check one of the two boxes at the top of the CDCR 1707 form to indicate if this is a **new/revised request** or a **change of address only**. If you check the "Change of address only" box, complete sections A, E, and F only.

SECTION A. APPLICANT INFORMATION

Check the box that most accurately describes your relationship to the inmate: **victim, witness, concerned citizen, or family member of victim** (next of kin)--indicate relationship to victim.

Circle the appropriate title: **Mr., Mrs., or Ms.**

Clearly print your name, home address, mailing address (if different), telephone number where you can be reached during the day, and email address (if you have one).

NOTE: It is your responsibility to keep the OVSRS informed of any changes to your personal information.

SECTION B. NOTIFICATION OF INMATE STATUS IN PRISON

Check the most appropriate box(es) regarding your request.

Checking the **1st box** will register you for notification of the **release, escape, or death** of an inmate.

Checking the **2nd box** will allow the Office of Victim and Survivor Rights and Services (OVSRS) to share your information with the California Attorney General's Office. The Attorney General's Office will notify you of the status and outcome of any criminal appeal filed by the inmate in this case.

The third box applies to victims/next of kin only.

Checking the **3rd box** will register you for notification of the date of an inmate's **parole hearing only** if the inmate has been sentenced to a prison term with a **life sentence**.

In addition, **check yes** to allow the OVSRS to share your information with the district attorney's office where the trial was held. The district attorney's office will help you if there is a parole hearing for an inmate with a life sentence. Check **no** if you do not want us to share your information.

SECTION C. CONDITIONS OF PAROLE FOR INMATE

Special conditions of parole are not guaranteed but you may check all that you wish to request.

Checking the **1st box** will request that the parolee have **no contact** with you while he/she is on parole.

Checking the **2nd box** will request that the parolee **not be allowed to live in the same county** that you live in.

The third box applies to victims and witnesses only.

Checking the **3rd box** will request that the parolee **not be allowed to live within 35 miles of your home address**. Per Penal Code Section 3003, available only for the following: *murder or voluntary manslaughter, mayhem, rape, sodomy by force, oral copulation, lewd acts on a child under 14, any felony punishable by death, stalking, and assault with a great bodily injury enhancement*.

SECTION D. RESTITUTION

Restitution is only collected if it is court ordered by a judge. Completing this section will provide the OVSRS with information to verify that our restitution records are complete. If your direct order of restitution states "TBD" for the dollar amount, contact the district attorney's office to request that a motion be filed to determine the restitution amount.

SECTION E. INMATE IDENTIFICATION

Provide as much information as you can in this section so we can be sure that we have the correct inmate involved in your case. If you need help completing this section, you may contact the District Attorney's Office in the county where the trial was held.

SECTION F. APPLICANT SIGNATURE

You must sign and date the form. The form cannot be processed without a signature. Forms without a signature will be returned.

KEEP THE PINK COPY FOR YOUR RECORDS AND MAIL THE WHITE ORIGINAL AND YELLOW COPY TO:

California Department of Corrections & Rehabilitation
Office of Victim and Survivor Rights and Services
P.O. Box 942883
Sacramento, CA 94283-0001

PRIVACY STATEMENT:

AGENCY STATEMENT: The California Department of Corrections & Rehabilitation (CDCR), Request for Victim Services, CDCR 1707.
OFFICE RESPONSIBLE FOR FORM: Office of Victim and Survivor Rights and Services, P.O. Box 942883, Sacramento, CA 94283-0001. The telephone number is 1 (877) 256-6877. **AUTHORITY:** Penal Code Section 679.003, 2085.5, and 3058.8.

PROVIDING INFORMATION: The information requested is necessary to process your request for victim services and is voluntary. Failure to provide any of the information requested may prevent OVSRS from processing your request. All information will remain confidential.